

Sexuality Throughout a Woman's Lifespan

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Learning Objectives

- Understand how, when and why to ask questions about sexuality
- Understand some common issues that relate to sexual dysfunction
- Understand basic treatment methods for different etiologies of sexual dysfunction

Sexuality

- Ask questions in a non-judgmental way
 - Recognize your own biases
- Ask only questions that are pertinent to health
- Ask questions using simple words (i.e. avoid words like “contraception”)

Cultural Differences



Questions to Ask



Questions to Ask

- Sexual activity
 - Are you sexually active?
 - Have you ever been sexually active?
 - Are you planning to become sexually active?
- Type of sex
 - Oral, anal, vaginal, sex toys
- Do you have sex with men, women, or both?
 - 5.2% of males and 12.5% of females 15 – 44 report engaging in sexual activity with the same sex

Questions to Ask

- Safety
 - Do you use condoms during sex?
 - Do you ever feel pressured to have sex?
- Contraception
 - Are you trying to get pregnant?
 - What do you do to prevent pregnancy?
- Pleasure
 - Are you satisfied with your sex life?
- Pain

Case 1: Adolescence

- 15 year old comes to your office with complaint of heavy periods
- She is thinking of becoming sexually active
- What questions do you ask her?
- What advice do you give her?

Adolescence

- Discovering sexuality
- Sex education does not increase sexual activity but actually increases safe sexual practices

Non-coital Sexual Activity

- Often initiated at approximately the same age as vaginal intercourse
- Perceived as “less risky”
- Only 15% of males and 11% of females who engage in oral sex have ever used a condom
- Can still transmit STDs
- Rate of STD transmission is highest with anal sex
 - True for all STDs, but HIV is 5 times more likely to be transmitted through anal sex than through vaginal sex
 - Oral sex is a common mode of transmission of HSV

Case 2

- 28 year old woman presents to your office with the complaint of “decreased libido”.
- What questions do you ask?

Case 2

- She has been married for four years
- She is taking OCPs for contraception
- Her husband wants a child but she is not ready
- She is an attorney and works 60 hours a week
- She has anxiety and takes Paxil
- She is fearful that her husband is cheating on her

Reproductive Years

- Social factors
- Metabolic causes
- Medication side effects
- Dyspareunia

Social Factors

- Sex becomes tied to fertility
- Sex becomes associated with a time of day
- Loss of interest in relationship
- Stress
- Time management

Treatment for Social Factors

- COMMUNICATION!
- Date night
- Scheduling time for intercourse
- Couples counseling
 - American Association of Sex Educators, Counselors and Therapists
 - <http://www.aasect.org/>

Metabolic Causes

- Hypersexuality
 - Androgen secreting tumors
 - Manic episodes
- Hyposexuality
 - Hypothyroidism
 - Premature menopause

Medication Side Effects

- Oral contraceptive pills
 - Increase Sex Hormone Binding Globulin
 - Decrease testosterone
 - Alternative types of contraception can be used
- Serotonin Reuptake Inhibitors
- Anti-epileptics
- Marijuana and EtOH

Dyspareunia

(with penetration)

- Vaginismus
 - Involuntary contracture of the muscles surrounding the introitus causing pain with penetration
 - Best treated with pelvic floor physical therapy
- Vulvodynia
 - Provoked pain when touching vestibule
 - Treated with pelvic physical therapy and topical analgesics

Dysparenia

(Deep)

- Endometrisosis
- Ovarian abnormalities
- Retroverted uterus
- Pelvic infection

Case 3

- A 55 year old woman comes to your office for her annual exam.
- What questions do you ask her about sexuality?
- She reports decreased interest in sex, pain with intercourse, and the inability to achieve an orgasm.

Peri-Menopause and Menopause

- Decreased hormones
- Dyspareunia
- Body image issues
- Male partner issues (erectile dysfunction)
- Relationship issues

Hormones in Menopause

- Dramatic drop in estrogen and testosterone
- Hormone replacement therapy
 - Estrogen can be beneficial but is only approved for the treatment of hot flashes
 - Testosterone can improve libido



Dyspareunia in Menopause

- Vaginal atrophy
- Can cause a psychological avoidance of arousal and engagement in intimate activities
- Treatment
 - Vaginal estrogen
 - Vitamin E tablets
 - Lubrication

Body Image/Relationship



Resources

- <http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Adolescent-Health-Care/Addressing-Health-Risks-of-Noncoital-Sexual-Activity>

Learning Objectives

- Things to cover: how to ask questions about sexuality, causes of sexual dysfunction including dyspareunia (dryness, endometriosis, circumcision), psychological issues (rape, religion, culture), issues with libido (hyper and hypo), effects of media (“am I normal”?)